2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jan 03, 2011
Secretary of State

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Entity Name: RYAN AND COMPANY INSURANCE INC.

Current Principal Place of Business:

2200 N. PONCE DE LEON BLVD
SUITE 10
SAINT AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

2200 N. PONCE DE LEON BLVD
SUITE 10
SAINT AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 26-2279640 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RYAN, MICHAEL J
2200 N. PONCE DE LEON BLVD
SUITE 10
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL RYAN

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: RYAN, MICHAEL J
Address: 2200 N. PONCE DE LEON BLVD SUITE 10
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VP
Name: RYAN, ANASTASIA R
Address: 2200 N PONCE DE LEON BLVD SUITE 10
City-St-Zip: SAINT AUGUSTINE, FL 32084

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL J RYAN PRES 01/03/2011

Electronic Signature of Signing Officer or Director — Date